

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new non-provisional applications under 37 CFR 1.53(b))

Attorney Docket No.	SJO920010155US1	(0105-0004)
First Inventor or Application Identifier:	Pinarbasi	
Title:	Method of Forming a Read Sensor Using a Lift-Off Mask Having a Hardmask Layer and a Release Layer	
Express Mail Label No.:	ET760373851US1	

Application Elements
(See MPEP chapter 600 concerning utility patent application contents)

ADDRESS TO: Assistant Commissioner For Patents
BOX PATENT APPLICATION
Washington, D.C. 20231

1. ☒ Fee Transmittal Form
(Submit an original, and a duplicate for fee processing)
2. ☒ Specification [Total Pages 24]
(preferred arrangement set forth below)
 - Descriptive title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R&D
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
3. ☒ Drawing(s) (35 USC 113) [Total sheets 7]
4. ☒ Oath or Declaration [Total Pages 3]
 - a. ☒ Newly executed (original or copy)
 - b. ☐ Copy from prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 17 completed)
[Note Box 5 below]
 - i. ☐ Deletion of Inventor(s)
Signed statement attached in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Microfiche Computer Program (Appendix)
7. ☐ Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. ☐ Computer Readable Copy
 - b. ☐ Paper Copy (identical to computer copy)
 - c. ☐ Statement Verifying identity

ACCOMPANYING APPLICATION PARTS

8. ☒ Assignment
9. ☐ 37 CFR 3.73(b) Statement
(when there is an assignee)
10. ☐ English Translation Document (if applicable)
11. ☒ Information Disclosure ☒ Copies of IDS
Statement (Form 1449) Citations
12. ☐ Preliminary Amendment
13. ☒ Return Receipt Postcard (CPEP 503)
(Should be specifically itemized)
14. ☐ Small Entity ☐ Statement filed in prior application,
Statement Status is still proper and desired
15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. ☒ OTHER: Express Mail Certification
Check # ☐ (\$

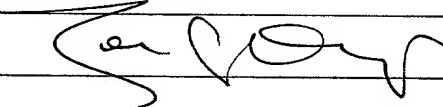
17. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information:
☐ Continuation ☐ Divisional ☐ Continuation-In-Part of prior application no.:
 Prior application information: Examiner: _____ Group/Art Unit: _____

18. CORRESPONDENCE ADDRESS

☐ Customer Number (____)
Or Bar Code Label

OR

☒ Correspondence Address Below

NAME	ATTN: John J. Oskorep		
ADDRESS	One Magnificent Mile Center 980 N. Michigan Avenue, Suite 1400 Chicago, Illinois 60611		
Telephone: 312-222-1860	Fax No.: 773-477-6144		
Name (print/type)	JOHN J. OSKOREP	Registration No.: (Attorney/Agent)	41,234
Signature		Date	21 Feb 2002

10/080303
02/21/02

JOHN J. OSKOREP, ESQ.
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FEE TRANSMITTAL

Attorney Docket No.	SJO920010155US1
First Named Inventor:	Pinarbasi
Application Number	not yet assigned
Filing Date:	not yet assigned
Examiner Name:	not yet assigned
Group/Art Unit:	not yet assigned

TOTAL AMOUNT OF PAYMENT:	\$ 740.00
METHOD OF PAYMENT (check One)	1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to: Deposit Account No.: 090466 Deposit Account Name: International Business Machines Corporation <input checked="" type="checkbox"/> Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17 2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other

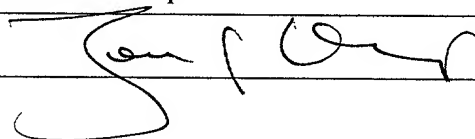
2. UTILITY Basic Filing Fee & Claims

(1) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	XX	XX	\$ 740.00	\$370.00	\$ 740.00
Total Claims	20 - 20 =	0	X \$ 18.00	X \$ 9.00	\$ 0.00
Independent Claims	3 - 3 =	0	X \$ 84.00	X \$ 42.00	\$ 0.00
Multiple Dependent Claim(s) (if applicable)		0	\$ 280.00	\$140.00	\$ 0.00
Total of above Calculations =					\$ 740.00

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$ 330.00	\$ 165.00	\$ 0.00
Reissue filing fee	\$ 740.00	\$ 370.00	\$ 0.00
Provisional filing fee	\$ 160.00	\$ 80.00	\$ 0.00
Total of above Calculations =			\$

3. ADDITIONAL FEES

Fee Description	Large Entity	Small Entity	Other
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
TOTAL:			\$

Name (print/type)	John J. Oskorep	Registration No.: (Attorney/Agent)	41,234
Signature		Date	21 Feb 2002

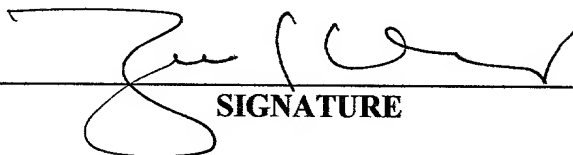
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DATE OF DEPOSIT: 21 February 2002

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37 CFR 1.10 ON THE DATE INDICATED ABOVE AND IS ADDRESSED
TO THE ASSISTANT COMMISSIONER FOR PATENTS,
WASHINGTON, D.C. 20231.

John J. Oskorep

NAME



SIGNATURE

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